

Cambridgeshire County Council.

EDUCATION COMMITTEE,

ELEVENTH ANNUAL REPORT

OF THE

SCHOOL MEDICAL OFFICER

FOR THE YEAR ENDING 31ST DECEMBER, 1919.

Cambridge:

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Introduction.

At the end of 1919 there were 137 schools under the control of the County Education Committee (45 Provided and 92 Non-Provided), comprising 145 separate departments. The number of children on the School Registers at the end of the year was 11204, the average number in attendance being 10,226.

Extent and Scope of Medical Inspection.

Routine medical inspection remained in abeyance until the autumn, owing to the continued absence of the Assistant Medical Officer on duties arising out of the War. During this period, and as far as practicable, the School Medical Officer re-inspected children ascertained at previous visits to be in need of observation or treatment, and inspected other children selected by the teachers or School Nurses as appearing to be in need of medical examination. The preliminary inspection made by the School Nurses included testing eyesight of children in the Code age-groups and noting any other defect, with examination of all children in attendance for the detection of verminous conditions.

When the Assistant Medical Officer took up her duties afresh in August the Committee resolved that as the work was unavoidably in arrears the resumption of routine medical inspection should be deferred until 1920. The great majority of the schools remained to be visited, and Dr. Gellatly undertook the work on the "ailing children" basis. It was thus possible for all the schools to be dealt with by the end of the year, refraction work and ascertainment of mental defect being also carried out as far as time permitted.

The following figures relate to visits paid to schools for the foregoing purposes both by the Medical and Nursing Staff:—

A. *By School Nurses.*

Schools visited	..	..	..	128
Children examined :				
Routine (Code Groups)	..		3232	
Special ..	..	..	330	
Other systematic verminous	..		5302	
			—	8864

B. *By School Medical Staff.*

Schools visited	..	..	..	137
Children examined :				
Specials ..	..	..	208	
Re-inspections	..	..	1917	
			—	2125

It may here be stated that the full scheme of medical inspection was resumed in January, 1920.

Remedial Measures.

The grant made by the Board of Education towards the cost of medical inspection and treatment for the financial year 1918-1919 amounted to £780.

The scheme of treatment commences before the children attain school age, a certain proportion receiving treatment for defects reported under the Maternity and Child Welfare Committee's scheme. The practice commenced in 1918 of sending to Head Teachers, for entry on medical record cards, details of medical history ascertained by the Health Visitors prior to school life, was continued in 1919.

The routine measures undertaken by the Education Committee will be considered under two headings, (a) arrangements for securing that treatment is provided ("following-up") and (b) the actual scheme of treatment set up and administered through the School Attendance Sub-Committee.

"Following-up."

Advice to Parents. The number of formal notices or letters sent to parents directing attention to defects sufficiently serious to call for treatment was as follows:—

(1)	From inspections by School Nurses	..	438
(2)	From Inspections by Medical Staff..	..	587

Of the 438 notices to parents following upon the visits of the School Nurses 399 were for uncleanliness and verminous conditions, 18 for contagious skin diseases, 10 for defective vision and squint, and 11 for other diseases.

The 587 notices to parents sent in consequence of examinations by the School Medical Staff were for the following conditions:—Uncleanliness and verminous conditions 331, contagious skin diseases 18, defective vision and squint 175, enlarged tonsils and adenoids 23, and other conditions 29. Further details will be found in Table II.

Re-inspections. Children re-inspected by the School Medical Staff numbered 1,917. The objects of re-inspection are (a) to ascertain whether medical treatment has been provided for notified defects, and, if so, with what result, and (b) to ascertain the condition of children previously regarded as requiring to be kept under observation.

School Nurses. School Nursing duties are undertaken by the Education Committee by the four Assistant Superintendents of the County Nursing Association, and by about 20 District Nurses, the whole education area being covered by their joint services. They act under the superintendence of Miss Bills, Superintendent of the County Nursing Association, under the direction of the School Medical Officer. As

these nurses also undertake, for the Maternity and Child Welfare Committee, visitation of children from birth to their entry upon school life, their continuous knowledge of the medical history of the children is of value. From this point of view alone it is clearly advantageous to retain their services, and the recent improvement of the financial position of the Central Staff was sound policy in the public interest.

The scope of the work of the School Nurses is indicated by the following figures :—

1. <i>Visits to Schools :</i>				
(a)	Systematic preliminary inspection	..		128
(b)	Other purposes	..	..	424
Total				552
2. <i>Visits to Homes :</i>				
(a)	Following up to secure treatment	..		2193
(b)	Special enquiries into infectious and contagious disease	..	..	1615
(c)	Special enquiries into refusal of dental treatment	..	..	1641
(d)	Other purposes	..	..	335
Total				5784

Of the total home visits, 38 per cent. were paid with the object of ensuring that medical treatment was obtained for various remediable defects, and that cleansing of unclean and verminous children was carried out. Advice was also given as to the treatment of minor ailments and on general hygienic matters, and poorly nourished or indifferently clothed children were kept under supervision. A further 28 per cent. of the visits were for interviews with parents of children for whom dental treatment was refused, a branch of the school nurse's work which showed an increase on the previous year. A similar proportion of visits was for enquiries into cases of contagious and infectious disease notified by the Head Teachers, advice also being given with regard to prevention of spread of infection, and the avoidance of dangerous complications. These opportunities, if rightly used, should gradually exercise a valuable educational influence on the working class parent.

Uncleanliness and Remedy of Verminous Conditions. As far as possible, all children present in school were examined by the School Nurses for the detection of verminous conditions at their visits for selection of children for medical inspection, and on other occasions by special request. In addition to securing immediate steps for remedy, verminous children were noted for subsequent examination by the Medical Staff. The approximate number of examinations made by the School Nurses under the foregoing circumstances was 8,500.

Including children examined by both nurses and medical staff, 730 notices were sent to parents of children who were in need of cleansing. The large majority of these cases were infested with nits in the hair to a moderate degree ; few were actually verminous, and these were in most cases excluded, being followed up in their homes by the School Nurses, and in some cases by local medical practitioners on behalf of the Committee.

The total number of such exclusions was 105, belonging to 88 families. The parents of four children were prosecuted under the School Attendance Bye-Laws, fines being inflicted in three cases, and an attendance order being made in the fourth.

An exact comparison with previous years would be somewhat difficult to arrive at, but if, owing to the special circumstances of the year, the systematic inspections by the School Nurses be taken as a basis, the proportion of children moderately or severely infested with nits or actually verminous was below 5 per cent. Compared with 6 per cent. in 1918, this shows an improvement.

Treatment.

The Education Committee's scheme of treatment may be briefly summarised as follows :—

Contribution to hospital for treatment of diseases of nose and throat, X-Rays treatment of ringworm, and for other general medical and surgical work.

Clinics for defective vision ; provision of spectacles.

Travelling dental clinic.

Assistance in travelling expenses for treatment.

Sanatorium treatment for tuberculosis (by the Public Health Committee).

The figures given in the following paragraphs show the proportion of the principal defects treated as ascertained during the year by *personal re-inspection* by the School Medical Staff. It was impracticable for the large majority of schools (111 out of 138) to be visited until the last four months of the year after the return of the Assistant Medical Officer, and to this fact the apparently unsatisfactory results as regards treatment are due. On reference to Table IV. at the end of this report it will be found that out of the 690 children for whom treatment was considered necessary, 463 are entered under the heading "no report available," which means that the schools involved would not be due for re-inspection until 1920, and the results of the advice given in 1919 will therefore not be available for purposes of this report. They will be given in the 1920 report.

Tonsils and Adenoids. Twenty-seven cases requiring treatment were seen. Of these four had received notices during 1918, but were not treated during that year, 2 cases had received operative treatment at Addenbrooke's Hospital, 6 had refused treatment; the remaining 19 were referred late in 1919, and will fall due for report in 1920.

In addition, verbal or written advice was given in 20 cases of mouth breathing. Further steps are being taken to impress the importance of breathing exercises in all cases of mouth breathing on both parents and teachers.

Defective Vision and Squint. Children seen who were considered to require treatment for these defects numbered 178. Thirteen of these had received notices during 1918, but were not treated during that year. Of the 178 cases, 150 cannot yet be reported upon owing to reasons already stated in the general paragraph on Treatment. Seventeen of the remaining 28 were found to have received satisfactory treatment, and in 11 cases no action had been taken. The majority of the latter children live in villages remote from a railway, and will in future be treated by the Assistant Medical Officer under the peripatetic scheme initiated in 1914. A large number of notices sent in these cases referred to matters such as repair of glasses.

Contribution to Hospital. The annual subscription of £50 to Addenbrooke's Hospital was continued. Recommendations were given by the Committee, after enquiry, for treatment of the following defects :—

Enlarged tonsils and adenoids	..	17
X-Rays treatment of ringworm	..	12
Other conditions	.. ..	18
		—
		47
		—

The "other conditions" comprised cleft palate 3, alopecia 3, external eye disease 5, and (one each) hernia, eczema, scabies, wryneck, goitre, maxillary abscess, middle ear disease, and cystitis.

School Clinics. Owing to the rural character of the area there are no premises specially provided for this purpose, but clinic schemes are in operation for the treatment of defects of vision and for dental treatment.

Defective Vision. Towards the end of the year the arrangements were resumed under which the Assistant Medical Officer undertakes the estimation of errors of refraction and prescription of spectacles. The work is done on school premises, neighbouring schools being grouped for the purpose. Generally speaking the more remote parishes are dealt with in this way. In addition, children from other parishes are referred to Dr. Graham and Dr. Palmer at the Cambridge and Linton centres. I have to record with much regret the death of Dr. Cory, who undertook similar duties at the Soham centre.

Refraction cases dealt with during the year under the above arrangements were as follows :—

<i>Centre.</i>	<i>Cases.</i>
Cambridge (Dr. Graham)	97
Linton (Dr. Palmer)	4
Village centres (Dr. Gellatly) ..	31

The total number of recommendations given by the Committee during 1919 was 151.

The sum expended by the Committee in providing or assisting to provide spectacles for necessitous children amounted approximately to £10. During her visits of re-inspection to the schools, the Assistant Medical Officer endeavours to examine all children for whom spectacles have been provided.

Dental Treatment. The scheme of dental treatment was continued on the same lines as formerly, the School Dentist travelling from school to school for the purpose. The work of both inspection and treatment are in his hands, but children noted by the Assistant School Medical Officer to be in need of treatment are referred to him as occasion arises. Mr. Evered's annual report, with statistical tables, will be found on page 18.

Owing to the system of annual re-inspection, the number of children who pass through the Dentist's hands has included those at increasingly higher ages, until all are now inspected from the age of 6 up to and including 13 years. During the year approximately 80 per cent. of the children on the school registers were inspected. The following comparative figures include both routine and special cases :—

	Number.	Difference from 1918.	Difference per cent.
Children inspected ..	8905	+527	+ 6.3
Children treated ..	2440	+444	+22.3
Teeth extracted ..	5192	+699	+15.5
Teeth filled	956	+271	+38.4

After making allowance for the fact that influenza interfered with treatment during the previous year, these figures record a notable increase in the amount of work done. The large increase in the number of fillings is especially important, as conservative treatment is particularly aimed at in the dental treatment of children. Compared with 1915, the first complete year of the dental scheme, the record for 1919 shows that the number of children inspected had considerably more than doubled, practically twice as many were treated; and while extractions showed an appreciable increase, the number of fillings had doubled.

The system of annual re-inspection is justified by the fact revealed by the tables, that of children who required no treatment in 1918, as high a proportion as 28.3 per cent. were found to be in need of it when re-inspected in 1919, only one year later. In addition, one-third of those

treated in 1918 were found to require further treatment in 1919. Of these, treatment was accepted for three quarters of the children, and refused for one quarter, some of the parents at any rate regarding dental treatment as a failure as repetition was needed in a year's time. This attitude is difficult to combat, and it will probably be some time before the parents are educated up to regarding dental treatment at annual intervals as essential to health. The fact that an increasing number of mothers apply to the Health Visitors under the Maternity and Child Welfare Scheme for dental treatment for themselves is, however, a hopeful indication for the future.

Mr. Evered notes that the proportion of children (including those re-inspected) for whom treatment was declined was 40 per cent. of those in need of it, or 3 per cent. fewer than in 1918; while the proportion of refusals among those inspected for the first time was lower still, viz., 36.6 per cent. It should be noted here that the proportion of refusals is calculated as a percentage of those for whom treatment is needed, and not of the total inspected. If the latter method were adopted the refusal rate would be as low as 17 per cent.

Much time and energy were expended by the School Nurses in interviewing the parents with a view to securing the withdrawal of refusals of dental treatment, 1,641 visits being paid to the homes with this object. The Head Teachers have also assisted materially. The fact that the children only too frequently are permitted to control the situation is still brought out strongly by the reports received.

Exercise of Powers under Special Acts.

Children Act. Legal proceedings were not taken under either Section 12 or Section 122 of this Act. Proceedings under School Attendance Bye-laws in cases of persistently verminous children have been referred to elsewhere.

The N.S.P.C.C. have co-operated with the Committee regarding children showing evidence of neglect; 37 children belonging to 10 families were referred to the Society during the year, and I would place on record my personal appreciation of the services of Inspector Tydeman who visited and supervised these families.

Education (Provision of Meals) Acts. No expenditure has been incurred by the Education Committee in this direction. The excellent scheme of school dinners at Bassingbourn, organised locally, and carried out by the personal efforts of the Head Teacher, Mr. Eayrs, and of Mrs. Eayrs, has been described in detail in previous annual reports.

At the request of the School Attendance Sub-Committee the Education Secretary presented a report based on the results of enquiry from the Head Teachers of all schools in the County. From this it appears that children remain for their mid-day meal in 102 out of 144 schools, the approximate number being 1,000 in the summer and 1,400 in the winter months. In addition to the Bassingbourn dinner scheme,

meals are sold at 9 schools on cookery instruction days, cocoa, tea, or hot milk is provided at 23 schools (mainly through the Head Teachers), while in 14 other schools facilities are available for heating and cooking food. Schemes in some 5 schools had been abandoned for lack of appreciation.

On the instructions of the Sub-Committee, the Education Secretary communicated with several remote schools with regard to dinner schemes, but the proposals were not received sympathetically by parents or School Managers, and no progress therefore was made.

I would draw attention to the fact that under the Maternity and Child Welfare Committee's Scheme milk has been supplied during the year in necessitous cases for children under school age. This has been much appreciated by the parents and has been of undoubted value to the children. It would be exceedingly beneficial if similar provision could be made by the Education Committee for school children suffering from malnutrition. Such cases should of course be carefully selected and recommended by the medical staff, due enquiry being made into parental circumstances, as is done at present in the case of children for whom medical treatment is provided.

Defective Children in Institutions.

			Mentally			Physically	
			Defective.	Epileptic.	Deaf.	Blind.	Defective.
Remaining December 31,							
1918	..	..	5	1	5	—	—
Admitted in 1919..	..	..	—	—	—	—	—
Discharged in 1919	..	..	1	1	1	—	—
Remaining December 31,			4	—	4	—	—
1919	..	..			

Dr. Gellatly makes the following note regarding the examination of mentally defective children, for which she is specially responsible :—

“ It was not possible to do much satisfactory work in this branch during 1919, but it is expected to develop it very considerably during 1920.

“ At each visit the Head Teacher is asked to present all children who are two years or more behind their age in school work, also any who have obvious peculiarities of temperament.

“ The names of these children are entered on a special list, and as soon as possible the children in question are fully examined physically, and by standard psychological tests, the Yerkes-Bridges Point Scale arrangement of the Binet Simon tests being used throughout.

“ Except in cases of very marked defect no child is graded and reported to Committee until this full examination has been carried out ; but as no case can be properly dealt with under half an hour, the work entailed is considerable, and is often crowded out by routine medical inspections.”

During the year 17 mentally defective children were reported upon to the School Attendance Sub-Committee under the Elementary Education (Defective and Epileptic Children) Act. Of these, 9 were suitable for instruction in a special school ; accommodation was sought for five of these children, but only two have yet been admitted (in 1920). The remaining 8 children (7 " ineducable " and 1 " detrimental ") were notified to the County Council under the Mental Deficiency Act ; 4 of them have since been admitted to Certified Institutions, and 4 placed under the supervision of the Cambridgeshire Voluntary Association for the Care of the Mentally Defective.

From 1914 to the end of 1919, reports have been presented under the Defective and Epileptic Children Act regarding 84 children. Of these, 6 have been placed in special schools, and 54 have been formally notified under the Mental Deficiency Act or otherwise brought by the Education Committee to the notice of the County Council, who have placed 21 in institutions, where the majority are receiving training in handicraft ; others have been referred to the Voluntary Association for statutory supervision in their homes.

The Littleton House Special School, under voluntary management, has now been transferred to larger premises at Girton, and there is now accommodation for about 40 boys. The Education Committee have obtained 8 places in this institution, and it may be hoped that additional accommodation may be available in course of time, as this number is inadequate to meet the Committee's requirements.

There is no special school accommodation for girls in the County, and it is exceedingly difficult to secure vacancies in existing schools elsewhere. The Committee for the Care of the Mentally Defective are preparing a scheme of institutional accommodation under the Mental Deficiency Act, and it would, in my opinion, be very advantageous if the Education Committee could join in such a scheme, so as to secure special school accommodation for girls in the section provided for high grade women and girls.

A considerable number of children whose names remained during the War on the observation list as probably or definitely mentally defective have arrived at the age at which they would normally leave school. These are now being followed up by the Enquiry Officer appointed under the Mental Deficiency Act for purposes of ascertainment, and it is hoped in this way to keep in touch with such defectives in order that the Local Authority may take action when circumstances require it. The medical records of defective children are thus of considerable future value where, as in many cases, the children may not have had the benefit of special instruction.

Detection and Prevention of Spread of Infectious and Contagious Disease,

After an interval of several months influenza again became prevalent in February. Although this outbreak was less extensive and of shorter duration than that of the previous outbreaks, it necessitated the closure of 89 schools and caused much interruption of school work. The mortality was low compared with that of 1919.

Towards the close of the year measles became prevalent, after an interval of five years since the last serious outbreak. There was a considerable child population unprotected by previous attack, and the disease has continued to spread since the end of the year. Each school is considered as a separate problem, closure being promptly resorted to where children are unprotected. Much useful service has been rendered by the Nurses, who, in their capacity of Health Visitor or School Nurse, visit the homes for enquiry, and advise as to precautions to be taken for prevention of spread of infection, and for the avoidance of dangerous complications. As the Regulations which required the notification of measles by the general public to the Local Sanitary Authority are now rescinded, practically the only sources of information now are the Head Teachers and the Health Visitors.

As in the case of measles, the School Nurses have continued to visit the homes of children notified by Head Teachers as suffering from various forms of infectious and contagious disease, 1,615 visits being paid during the year for enquiry and advice.

The School Medical Staff paid 66 special visits to schools for enquiry into infectious and contagious disease. Of these visits, 25 were for scarlet fever, 22 for diphtheria, 6 for measles, 3 for mumps, and 10 for contagious skin diseases—(scabies 4, impetigo 4, ringworm 2). For bacteriological diagnosis of diphtheria, 301 swabs were taken, 16 of which showed evidence of diphtheria.

Apart from the 89 closures for influenza already noted, the School Medical Officer certified for the closure of 40 schools, of which 16 were closed for measles, 11 for diphtheria, 6 for scarlet fever, 6 for whooping cough, and 1 for chicken pox. Where serious efforts are made to limit the spread of infection by this means, it is at times discouraging to learn that the object is defeated locally by children being permitted to come together at various forms of public assemblage, which are more likely to spread infection than attendance at the Day Schools.

Contagious Diseases of the Skin. The following figures show the number of cases disclosed from all sources during the year :—

		Ringworm of scalp.	Ringworm other sites.	Scabies.	Impetigo.
Head Teacher ..	..	14	30	31	142
School Medical Staff ..	..	—	—	15	26
School Nurses ..	..	3	2	15	96
Other sources ..	..	2	—	2	10
Total 1919 ..		19	32	63	274
,, 1918 ..		16	24	29	161

The number of ringworm cases is comparatively small, the low incidence of scalp cases being especially satisfactory, as it does not exceed approximately 1 in 500 children in average attendance. Of the scalp cases, 13 are known to have undergone X-rays treatment at Addenbrooke's

Hospital by Dr. Shillington Scales, who has continued to co-operate in a most helpful manner for purposes of administration.

The considerable increase in impetigo cases recorded is largely attributable to greater activity on the part of the Teachers and School Nurses in drawing attention to such defects. Part of the increase recorded under both impetigo and scabies is due to resumption of duty by the Assistant Medical Officer ; but there is undoubtedly a disconcerting true increase in the prevalence of scabies frequently traceable to military sources. The figures are swollen by the fact that several members of one family are commonly infected.

Tuberculosis. During the year one child was notified by the School Medical Staff. Doubtful cases were referred to the Tuberculosis Officer for opinion, and notified cases were visited in their homes by the Tuberculosis Nurse.

The Education Committee do not maintain tubercular children in institutions, such provision being made by the County Council under their Sanatorium scheme. At the commencement of the year 3 children from the County Education area remained in sanatoria, to which they were admitted in 1918, while during the year 21 children were admitted, compared with 10 in 1918. The admissions were as follows :—

	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Lungs and thoracic glands	5	8	13
Joints	3	1	4
Spine	2	1	3
Cervical glands	1	—	1
Total	11	10	21

At the end of the year 12 children were still in sanatoria and 12 had returned to their homes

No open-air school has yet been provided for children who are suffering from malnutrition or other conditions which diminish their resistance to tubercular infection, and such provision would undoubtedly be of value. It may be noted here that it has been resolved to reconstruct the main structure of the Papworth Everard Council School on open-air lines, in view of the establishment of the Cambridgeshire Tuberculosis Colony in the village.

Miscellaneous.

Special Reports on School Children. At the request of the School Attendance Sub-Committee, 89 reports were presented regarding the fitness of children for school attendance. These include 18 mentally defective, 1 physically defective, and 1 partially blind.

Medical Inspection of Secondary Schools. There being heavy arrears of work to be made up in the elementary schools, owing to interruption

caused by the War, it has not yet been practicable to pay special attention to the secondary schools. Successful candidates for County Minor Scholarships were, however, medically examined by the School Medical Staff, and all proved medically fit to hold their scholarships. The numbers were as follows :—

County School for Boys	..	..	25
County School for Girls	..	..	29
Soham Grammar School	..	..	3
Ely High School	..	..	3
			—
			60
			—

School Sanitation. During the year action was authorised, on reports by the County Architect, regarding structural matters in a considerable number of Council Schools, including reconstruction of the cesspool and laying on of water to Teachers' houses at Melbourn, relaying of drains at Burwell, improved heating at Harston, reconstruction of offices at Impington, and tar paving of a number of playgrounds.

At Papworth Everard it was resolved to appropriate a portion of the school building for purposes of a house for the Head Teacher.

Owing to War conditions the periodical thorough cleansing and redecoration has been deferred in many schools, and such matters are now urgently in need of attention.

Dr. Gellatly furnishes the following note :—

“ Apart from structural defects there are two points which urgently require attention, and which can be remedied without any very serious financial outlay.

1. Provision of suitable washing accommodation, and insistence on its use.
2. Attention to the cleanliness and orderliness of the offices.

“ Most schools are provided with bowls, etc., for washing, the accommodation being, on paper, more or less satisfactory, but in many it is not made use of, no water or soap being provided, and no arrangements being made for emptying waste water. On the other hand, in certain schools, where the teacher takes an interest and monitors are appointed to attend to such matters, excellent use is made of very simple appliances.

“ It ought to be possible in every school to give the children some opportunity of profiting by instruction in personal hygiene, and of at least ensuring that no child has any excuse for presenting himself in school with dirty face and hands. It might in this connection be suggested that a small mirror securely fixed in an easily accessible position is a most useful adjunct to the cloakrooms, and ought not to be considered a luxury.”

Housing of Head Teachers. In November, 1918, a joint report on this subject was presented by the Education Secretary, County Architect, and School Medical Officer, in which it was stated that as regards Council Schools no house was provided for 18 Head Teachers, while 2 of those provided were poor and 2 were totally unsuitable. Of Non-Provided Schools, 12 had no house for the Head Teacher, while 9 of the houses provided appeared unsuitable or of doubtful suitability.

Certain of the Council School-Houses were inspected and reported upon by a Special Sub-Committee during 1919, and a schedule was eventually presented showing that the total number of houses required was 44 (Council 23, Non-Provided 21).

It was resolved that 23 houses be provided for 23 Council Schools, the provision to be spread over a period of three years ending July 31st, 1922. The following schools were scheduled to be dealt with in the first year :—Cottenham, Fen Drayton, Foxton, Lode, Papworth Everard, North Hall and Stetchworth (Heath).

Various sites have been reported upon, and plans have been prepared, but the building stage has not yet been reached. It is now proposed not to proceed further with two of the houses originally resolved upon, and others will be substituted.

In concluding this report I would acknowledge my indebtedness to Dr. Gellatly, who prepared the medical statistics and drafted part of the text of the report.

FRANK ROBINSON,
School Medical Officer.

County Hall,
Cambridge.

DENTAL INSPECTION AND TREATMENT.

Sixth Annual Report by Mr. J. C. G. Evered, L.D.S. (Edin.),
County School Dentist.

During 1919, children aged 6 to 12 were dealt with, and in the latter part of the year those aged 6 to 13 years.

From the statistical tables appended to the School Medical Officer's report, it will be seen that of 8,614 children who underwent routine dental inspection, 4,924, or 57.1 per cent., required no treatment, while 3,690, or 42.9 per cent. did require it, being 2.5 per cent. lower than last year. Of those requiring treatment 60 per cent. received it, the parents refusing treatment for the remaining 40 per cent., a reduction of 3 per cent. on last year's refusals. In twelve schools there were no refusals of treatment, and in 28 schools there were fewer than 5 refusals. The numbers of temporary and permanent teeth extracted were 4,640 and 408 respectively, and 909 fillings were done. Of the total number of children inspected, 5,350, or 55.9 per cent., were found to have clean mouths, while pus was noted to be present in the mouths of 2,993, or 44.1 per cent.

Children to the number of 291 were treated as special cases, being either over or under the routine age. For these children 118 temporary and 26 permanent teeth were extracted and 67 were filled.

The total number of children who received treatment during the year was 2,243. The numbers of temporary and permanent teeth extracted were respectively 4,758 and 434, while 976 fillings were done.

I must again record my thanks to the teaching staff for the very cordial and valuable help they have continued to give me in my work, and also to the members of the nursing staff, who have rendered invaluable assistance in interviewing the parents of children for whom treatment has been refused.

MEDICAL INSPECTION AND TREATMENT.

Table 1. Number of children inspected during 1919.

		"Code" Groups.	Intermediate Groups.	Special Cases.	Re-examinations.
Boys	..	—	—	117	613
Girls	..	—	—	91	1304
Total	..	—	—	208	1917

NOTES. (1) Routine inspection was suspended, and the "ailing children" basis adopted.

(2) The 8864 children examined by School Nurses only are not included in this table. For particulars see "Extent and Scope of Medical Inspection." (page 5).

TABLE V. INSPECTION, TREATMENT, ETC., OF CHILDREN DURING 1919.

(1)	The total number of children medically inspected (whether Code Group, special or ailing child)	..	2125
(2)	The number of children in (1) suffering from defects (other than uncleanliness or defective clothing or footgear) who require to be kept under observation (but not referred for treatment)	.. ..	444
(3)	The number of children in (1) who were referred for treatment (excluding uncleanliness, defective clothing, etc.)	.. .. ..	330
(4)	The number of children in (3) who received treatment for one of more defects (excluding uncleanliness, defective clothing, etc.)	.. ..	21

TABLE II. Return of defects found in the course of Medical Inspection in 1919.

Defect or Disease.			Code Groups		Specials	
			Number referred for Treatment.	Number requiring to be kept under observation, but not referred for Treatment.	Number referred for Treatment.	Number requiring to be kept under observation, but not referred for Treatment.
(1)			(2)	(3)	(4)	(5)
Skin.	Malnutrition .. ..	..			8	36
	Uncleanliness :					
	Head .. ..	..			335	270
	Body .. ..	..			23	26
	Ringworm :					
	Head .. ..	..			—	2
	Body .. ..	..			—	—
	Scabies .. ..	..			9	—
	Impetigo .. ..	..			25	4
	Other Disease of skin ..	..			6	14
Eye.	Defective Vision and Squint ..	..			181	119
	External Eye Disease ..	..			11	8
Ear.	Defective Hearing .. ..	..			1	5
	Ear Disease .. ..	..			6	6
Teeth	Dental Disease .. ..	..			6	1
Nose	Enlarged Tonsils .. ..	..			11	49
and	Adenoids .. ..	..			1	5
Throat	Enlarged Tonsils & Adenoids ..	..			13	6
	Defective Speech .. ..	..			—	6
Heart	Heart Disease .. ..	..			—	—
and	Organic .. ..	..			—	—
Circula-	Functional .. ..	..			—	6
tion	Anæmia .. ..	..			—	4
	Pulmonary Tuberculosis :					
	Definite .. ..	..			1	5
Lungs	Suspected .. ..	..			20	12
	Chronic Bronchitis .. ..	..			—	—
	Other Disease .. ..	..			—	—
Nervous	Epilepsy .. ..	..			1	4
	Chorea .. ..	..			2	1
System	Other Disease .. ..	..			1	5
	Non-pulmonary Tuberculosis :					
	Glands .. ..	..			2	1
	Bones and Joints .. ..	..			1	1
	Other Forms .. ..	..			—	1
	Rickets .. ..	..			—	—
	Deformities .. ..	..			1	4
	*Other Defects or Disease ..	..			41	139

* Under this heading are included cases of mouth-breathing (referred for treatment 20, observation 46) and mental defect (referred for action 5, observation 68).

TABLE III. Numerical Return of all Exceptional children in the area in 1919.

				Boys.	Girls.	Total.
Blind (including partially blind).	Attending Public Elementary Schools			2	I	3
	Attending Certified Schools for the Blind			—	—	—
	Not at School			2	—	2
Deaf & Dumb (including partially dumb).	Attending Public Elementary Schools			—	—	—
	Attending Certified Schools for the Deaf.. ..			3	2	5
	Not at School			—	I	I
Mentally Deficient.	Feeble Minded.	Attending Public Elementary Schools		52	24	76
		Attending Certified Schools for Mentally Defective Children		2	2	4
		Notified to the Local (Control) Authority during the year ..		—	I	I
		Not at School		47	8	55
	Imbeciles.	At School		2	3	5
		Not at School		I9	8	27
	Idiots	..	.. ..	2	2	4
Epileptics.	Attending Public Elementary Schools			3	I	4
	Attending Certified Schools for Epileptics			—	—	—
	Not at School			3	5	8
Pulmonary Tuberculosis.	Attending Public Elementary Schools			I5	I5	30
	Attending Certified Schools for Physically Defective Children			—	—	—
	Not at School			30	23	53
Physically Defective.	Other forms of Tuberculosis.	Attending Public Elementary Schools		I8	6	24
		Attending Certified Schools for Physically Defective children		—	—	—
		Not at School		2I	23	44
Cripples others than Tubercular.	Attending Public Elementary Schools			2	—	2
	Attending Certified Schools for Physically Defective Children			—	—	—
	Not at School			I	I	2
Dull or Backward.*	Retarded 2 years			345	275	620
	Retarded 3 years			85	55	I40

*Judged according to age and standard

TABLE IV.—TREATMENT OF DEFECTS OF CHILDREN DURING 1919.

Condition.	No. of defects found for which treatment was considered necessary.			No. of Defects for which no report is available.	No. of defects treated.	Results of treatment			No. of defects not treated.	*Percentage of defects treated
	From previous year	New	Total			Remedied	Improved	Unchanged		
Clothing ..	1	20	21	18	2	—	2	—	1	66.6
Footwear ..	—	—	—	—	—	—	—	—	—	—
Cleanliness of Head ..	87	229	316	135	131	2	35	92	50	72.3
Cleanliness of Body ..	1	22	23	20	2	—	2	—	1	66.6
Nutrition ..	—	7	7	7	—	—	—	—	—	—
Nose and Throat ..	9	38	47	39	2	1	1	—	6	25.0
External eye disease ..	1	12	13	11	2	—	1	1	—	100
Ear disease ..	—	4	4	2	—	—	—	—	2	—
Teeth ..	—	4	4	4	—	—	—	—	—	—
Heart and Circulation ..	—	—	—	—	—	—	—	—	—	—
Lungs ..	—	7	7	7	—	—	—	—	—	—
Nervous System ..	—	5	5	5	—	—	—	—	—	—
Skin ..	—	46	46	41	5	5	—	—	—	100
Rickets ..	—	—	—	—	—	—	—	—	—	—
Deformities ..	—	1	1	1	—	—	—	—	—	—
Tuberculosis—non-pulmonary ..	1	3	4	3	1	—	1	—	—	100
Speech ..	—	—	—	—	—	—	—	—	—	—
Mental condition ..	—	4	4	4	—	—	—	—	—	—
Vision and Squint ..	13	165	178	150	17	—	12	5	11	60.7
Hearing ..	1	1	2	1	1	—	1	—	—	100
Miscellaneous..	—	8	8	8	—	—	—	—	—	—
Total ..	114	576	690	456	163	8	50	96	71	69.6

* This is calculated on total defects found, less those for which no report is yet available.

Dental Inspection and Treatment.

TABLE VI.

TOTALS FOR ALL SCHOOLS.

1. *Schools dealt with :—*

A. Schools inspected and treated	..	..	138
B. Schools inspected only	..	..	8
C. Total schools visited (A + B)	..	..	146

2. *Children dealt with :—*

A. In schools inspected and treated	..	..	8343
Required no treatment	..	..	4769
Required treatment	..	..	3574
Received treatment	..	..	2149
Refused treatment	..	..	1425
Temporary teeth extracted	..	..	4640
Permanent teeth extracted	..	..	408
Fillings	..	..	909
B. In schools inspected only	..	..	271
Required no treatment	..	..	155
Required treatment	..	..	116
C. In total schools visited (A + B)	..	..	8614
Required no treatment	..	..	4924
Required treatment	..	..	3690
D. Special cases	..	..	291
Temporary teeth extracted	..	..	118
Permanent teeth extracted	..	..	26
Fillings	..	..	67

TABLE VII
ANALYSIS OF CHILDREN INSPECTED AND RE-INSPECTED.

		RESULT IN 1919.							
	No.	Required no Treatment.		Required Treatment.		Received Treatment.		Refused Treatment.	
		No.	%	No.	%	No.	%	No.	%
Required treatment in 1918	3299	1587	48.1	1712	51.9	854	49.8	858	50.2
Received "	1871	1243	66.4	628	33.6	482	76.7	146	23.3
Refused "	1428	344	23.8	1084	76.2	372	34.3	712	65.7
Required no treatment "	3850	2764	71.7	1086	28.3	816	75.1	270	24.9
Total re-inspected in 1919	7149	4351	60.8	2798	39.2	1670	59.6	1128	40.4
Total inspected for first time in 1919	1704	866	50.8	838	49.2	532	63.4	306	36.6

TABLE VIII.

SHOWING TABLES FOR SEXES AT DIFFERENT AGES.

Age.	Sex.	Inspected.	Absent from Inspection.	Required no Treatment.	Required Treatment.	Received Treatment.	Refused Treatment.	Temporary Extractions.	Permanent Extractions.	Fillings.	Percentage requiring Treatment at various ages.
6 years	Boys	553	20	267	286	173	113	555	2	8	51.3
	Girls	507	22	253	254	153	101	497	—	9	50.1
	Both	1060	42	520	540	326	214	1052	2	17	50.9
7 years	Boys	594	26	267	327	193	134	578	1	20	55.0
	Girls	565	26	277	288	175	113	515	6	26	50.9
	Both	1159	52	544	615	368	247	1093	7	46	53.1
8 years	Boys	596	23	301	295	177	118	536	6	31	49.4
	Girls	606	26	290	316	184	132	470	20	73	52.1
	Both	1202	49	591	611	361	250	1006	26	104	50.8
9 years	Boys	595	23	343	252	147	105	320	23	46	42.3
	Girls	530	19	293	237	134	103	273	26	68	44.7
	Both	1125	42	636	489	281	208	593	49	114	43.4
10 years	Boys	617	24	400	217	137	80	279	39	58	35.1
	Girls	621	13	400	221	136	85	197	41	97	35.5
	Both	1238	37	800	438	273	165	476	80	155	35.3
11 years	Boys	612	13	412	200	116	84	150	48	89	32.6
	Girls	628	16	420	208	118	90	120	51	95	33.1
	Both	1240	29	832	408	234	174	270	99	184	32.9
12 years	Boys	610	26	410	200	128	72	95	65	117	32.7
	Girls	608	23	375	233	147	86	40	70	128	38.2
	Both	1218	49	785	433	275	158	135	135	245	35.5
13 years	Boys	45	—	30	15	8	7	4	6	3	33.3
	Girls	56	4	31	25	23	2	11	4	41	44.6
	Both	101	4	61	40	31	9	15	10	44	39.6
Totals	Boys	4222	155	2430	1792	1079	713	2517	190	372	42.4
6—13	Girls	4121	149	2339	1782	1070	712	2123	218	537	43.2
	Both	8343	304	4769	3574	2149	1425	4640	408	909	42.8
Special Cases	Boys	149	—	89	60	43	17	61	9	24	—
	Girls	142	—	82	60	51	9	57	17	43	—
	Both	291	—	171	120	94	26	118	26	67	—
Grand Total	Boys	4371	155	2519	1852	1122	730	2578	199	396	—
	Girls	4263	149	2421	1842	1121	721	2180	235	580	—
	Both	8634	304	4940	3694	2243	1451	4758	434	976	—

TABLE IX.

INDIVIDUAL SCHOOLS.

SCHOOL,	Inspected.	Absent from Inspection.	Required no Treatment.	Required Treatment.	Received Treatment.	Refused Treatment.	Temporary Extractions.	Permanent Extractions.	Fillings.	Special Cases.
Abington Pigotts C. of E.	16	2	12	4	4	..	3	3	..	5
Arrington C. of E... ..	40	..	18	22	13	9	24	7	3	3
Ashley Cl.	78	1	44	34	25	9	60	7	7	..
Babraham Endd. C. of E...	36	..	16	20	15	5	58	..	2	2
Balsham C. of E.	84	1	45	39	22	17	41	5	7	..
Barrington C. of E.	47	2	26	21	17	4	35	5	10	3
Barton C. of E.	26	1	18	8	3	5	..	..	4	..
Bassingbourn Cl.	140	..	83	57	49	8	114	7	29	..
Bottisham Cl.	84	..	63	21	13	8	29	2	2	..
Bourn P.	63	..	30	33	20	13	48	5	16	..
„ Childerley Gate Cl.	32	..	16	16	10	6	18	2	4	3
Boxworth C. of E... ..	29	3	22	7	3	4	4	..	3	8
Brinkley Endd.	25	..	13	12	11	1	24	..	6	3
Burrough Green Endd.	46	..	20	26	19	7	34	5	10	..
Burwell Cl.	118	5	74	44	12	32	27	4	2	..
„ Boys	32	3	24	8	1	7	3	..	..	11
„ Girls P.	58	4	36	22	5	17	11	2	1	..
„ St. Andrew's C. of E.	21	2	14	7	4	3	10	..	4	2
Carlton	24	..	11	13	1	12	4	..	..	2
Castle Camps C. of E.	65	1	28	37	17	20	38	4	4	..
Caxton	37	2	26	11	9	2	22	2	..	..
*Cherryhinton C. of E.	185	6	110	75	58	17	123	9	32	..
Cheveley, Warren's C. of E.	79	4	46	33	22	11	49	7	2	..
Chippenhams,										
Lord Orford's Endd...	63	..	39	24	16	8	45	..	4	..
Comberton	45	2	29	16	16	..	31	3	6	3
Conington C. of E... ..	8	..	4	4	3	1	8	..	3	6
Cottenham Cl. Mixed	212	4	108	104	54	50	111	12	44	4
„ Infants	54	1	21	33	16	17	43	..	..	1
Croxton C. of E.	71	4	35	36	27	9	55	2	12	..
Croydon C. of E.	24	4	11	13	11	2	17	5	6	5
†Dry Drayton P.	59	5	41	18	12	6	22	1	4	..
*Dry Drayton P.	65	4	43	22	15	7	29	..	8	..
Dullingham Cl.	66	1	38	28	13	15	35	2	5	..
Duxford	92	5	49	43	31	12	81	3	6	..
East Hatley and Hatley										
St. George C. of E.	34	1	18	16	12	4	28	2	6	4
Elsworth	60	2	31	29	17	12	43	4	6	..
Fordham C. of E. Mixed	118	1	92	26	8	18	18	1	5	..
„ „ Infants	51	15	36	15	5	10	16	..	..	..
Fowlmere Cl.	76	4	44	32	23	9	55	3	8	..

SCHOOL.

	Inspected.	Absent from Inspection.	Required no Treatment.	Required Treatment.	Received Treatment.	Refused Treatment.	Temporary Extractions.	Permanent Extractions.	Fillings.	Special Cases.
Foxton Cl.	53	1	30	23	20	3	46	5	4	6
†Fulbourn Cl.	108	2	66	42	14	28	25	5	6	..
*Fulbourn Cl.	112	1	73	39	24	15	28	2	26	..
Fulbourn C. of E. Infants..	28	..	10	18	6	12	20	..	..	..
Gamlingay Cl. Boys . . .	95	2	47	48	35	13	66	11	13	3
„ Girls	79	1	45	34	28	6	26	10	20	3
„ Infants	24	3	9	15	11	4	42	..	..	..
†Girton Endd.	50	..	26	24	15	9	40	3	4	..
*Girton Endd.	50	2	32	18	9	9	22	..	7	..
†Grantchester	57	2	28	29	10	19	16	4	7	..
*Grantchester	65	2	37	28	22	6	44	10	9	..
Graveley, Trotter's Charity C. of E.	33	..	14	19	12	7	35	3	7	6
Great Abington Cl.	61	..	32	29	21	8	43	2	9	..
Great Bartlow C. of E. . .	15	..	5	10	5	5	17	..	..	3
Great Chishall C. of E. . .	59	3	33	26	26	..	56	8	5	..
„ (North Hall) Cl. . . .	13	..	7	6	6	..	9	4	..	5
*Great Shelford C. of E. . .	179	9	118	61	30	31	47	6	14	..
Great Wilbraham C. of E. .	58	3	33	25	13	12	28	3	4	..
Guilden Morden C. of E. . .	59	1	27	32	13	19	19	6	9	..
Hardwicke	19	1	12	7	6	1	12	1	2	3
Harlton	22	2	18	4	1	3	2	..	..	11
Harston Cl.	78	2	58	20	10	10	24	2	8	3
Haslingfield Endd.	56	5	34	22	12	10	17	6	6	..
Hauxton Cl.	47	1	33	14	10	4	22	1	7	..
Heydon C. of E.	17	..	7	10	9	1	17	5	2	4
Hildersham	19	..	8	11	7	4	18	..	..	3
Hinxton	36	..	22	14	9	5	24	..	9	4
Histon Cl. Mixed	170	10	111	59	35	24	40	5	41	..
*Horningsey C. of E. . . .	39	1	17	22	17	5	38	5	10	10
Horseheath C. of E.	50	..	17	33	14	19	22	4	13	3
Ickleton	70	2	39	31	20	11	41	2	11	2
Impington Cl. Mixed . . .	68	..	28	40	28	12	74	1	..	..
Isleham C. of E. Mixed . .	164	4	80	84	51	33	96	13	19	..
„ „ Infants	36	2	15	21	12	9	38	..	..	..
Kennett C. of E.	24	1	15	9	9	..	17	..	5	6
Kingston	17	1	7	10	6	4	21	1	1	3
Kirtling P.	93	4	46	47	32	15	66	2	12	..
Knapwell C. of E.	17	2	13	4	4	..	12	..	2	4
*Landbeach C. of E. . . .	55	..	31	24	10	14	17	5	14	..
Linton C. of E. Mixed . .	126	4	73	53	37	16	55	9	26	7
„ „ Infants	33	3	16	17	10	7	29	1	3	..
Litlington C. of E.	47	2	28	19	6	13	23	1	..	..
Little Eversden C. of E. . .	42	..	29	13	7	6	19	2	4	..
Little Gransden C. of E. . .	32	1	14	18	12	6	20	6	6	3

SCHOOL.	Inspected.	Absent from Inspection.	Required no Treatment.	Required Treatment.	Received Treatment.	Refused Treatment.	Temporary Extractions.	Permanent Extractions.	Fillings.	Special Cases.
Little Wilbraham Six Mile										
Bottom Cl.	58	1	29	29	12	17	22	..	7	6
Lode Cl.	71	7	48	23	20	3	44	1	10	..
Lolworth Cl.	28	..	11	17	8	9	19	3	..	10
Longstanton C. of E. ..	35	..	19	16	11	5	27	2	4	16
Longstowe C. of E. ..	34	..	18	16	8	8	18	1	4	2
*Madingley	37	..	20	17	7	10	20	3	3	3
Melbourn Cl.	136	1	82	54	38	16	101	1	23	5
*Meldreth Cl.	52	1	31	21	11	10	14	4	6	..
Milton P.	70	6	48	22	13	9	17	5	4	..
Newton	15	2	8	7	4	3	10	..	2	2
Oakington	38	1	22	16	15	1	40	3	4	..
Orwell C. of E.	28	..	14	14	8	6	9	3	10	4
„ Cl. Infants	11	..	3	8	5	3	17	..	..	2
Over Cl.	67	..	41	26	12	14	25	2	6	..
Over C. of E.	32	1	22	10	5	5	7	2	2	..
Pampisford Cl.	21	1	12	9	9	..	15	3	5	2
Papworth Everard Cl. ..	13	4	9	4	4	..	4	..	3	5
Sawston Cl. Senior ..	91	..	47	44	32	12	36	15	41	6
„ „ Junior	90	4	34	56	40	16	120	4	10	..
Shepreth Cl.	60	6	42	18	6	12	18	..	..	..
Shudy Camps C. of E. ..	27	1	18	9	9	..	19	2	3	3
Snailwell	23	..	8	15	9	6	19	2	3	8
Soham C. of E. Girls ..	169	3	124	45	15	30	20	5	11	..
Soham Cl. Boys	247	13	146	101	46	55	119	9	7	..
Soham Cl. Infants	105	3	64	41	16	25	58	..	..	..
Soham Cl. Junior Girls ..	100	3	51	49	23	26	70	1	2	..
†Stapleford Cl.	42	3	26	16	15	1	37	..	4	4
*Stapleford Cl.	41	2	30	11	11	..	29	1	..	5
Steeple Morden C. of E. ..	53	..	33	20	7	13	16	1	3	..
„ „ Odsey Cl. ...	35	1	26	9	4	5	8	..	3	2
Stetchworth C. of E. ..	78	7	36	42	22	20	77	5	4	..
„ (Heath) Cl.	33	1	20	13	6	7	14	3	..	3
*Stow-cum-Quy C. of E. ..	43	2	28	15	13	2	17	2	8	3
Swaffham Bulbeck	78	..	48	30	23	7	32	4	18	..
Swaffham Prior C. of E. ..	75	3	44	31	19	12	44	2	13	..
Swavesey	95	9	57	38	17	21	44	1	6	..
Tadlow C. of E.	17	..	9	8	7	1	15	2	3	..
Teversham C. of E.	25	2	19	6	6	..	5	2	7	7
Thriplow C. of E.	62	..	49	13	10	3	27	..	..	..
Toft and Caldecote C. of E.	25	..	9	16	10	6	17	6	6	3
*Trumpington C. of E. ..	111	6	68	43	42	1	95	3	7	..
Waterbeach Cl. Infants ..	56	2	18	38	19	19	54	..	..	..
„ P.	119	..	82	37	18	19	29	8	12	..
„ Chittering Cl.	19	..	4	15	5	11	6	2	..	3

SCHOOL.	Inspected.	Absent from Inspection.	Required no Treatment.	Required Treatment.	Received Treatment.	Refused Treatment.	Temporary Extractions.	Permanent Extractions.	Fillings.	Special Cases.
Wendy and Shingay District	21	..	13	8	5	3	15	2	3	5
Westley Waterless Cl. ..	22	1	14	8	5	3	15	4	..	6
Weston Colville Cl. ..	43	5	23	20	15	5	34	3	4	3
West Wickham C. of E. ..	34	..	14	20	9	11	20	3	2	3
West Wratting C. of E. ..	45	..	23	22	6	16	4	1	6	3
Whaddon C. of E. ..	20	3	13	7	7	..	10	..	7	2
Whittlesford C. of E. ..	56	5	32	24	16	8	29	2	8	..
Wicken Cl.	80	2	33	47	18	29	55	3	6	..
Willingham Cl.	158	17	69	89	57	32	141	12	43	6
Wimpole C. of E.	28	2	14	14	12	2	39	1	1	2
Wood Ditton C. of E. ..	82	3	53	29	24	5	51	5	7	..
Burwell Reach	21	9	16	5	..	..	..	..	..	..
*Coton C. of E.	55	5	32	23	..	..	..	..	..	..
*Fen Ditton C. of E. ..	79	4	51	28	..	..	..	..	..	..
Little Wilbraham C. of E.	14	..	8	6	..	..	..	..	..	..
Papworth St. Agnes P. ..	13	..	9	4	..	..	..	..	..	..
*Rampton Cl.	28	1	10	18	..	..	..	..	..	..
Soham Barway Cl.	18	3	9	9	..	..	..	..	..	..
Soham Fen Cl.	43	1	20	23	..	..	..	..	..	..

* Children aged 13 included.

† Visited twice, the first visit (for treatment) having been deferred from 1918 owing to influenza.



